

SCC eFile	2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	213500906					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: HESS MART, INC.</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA 23060-6802</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: DE</p> </div> <div style="width: 35%;"> <p>DUE DATE: 1/31/2013</p> <p>SCC ID NO: F0472003</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>5,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	5,000	
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COMMON	5,000						
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="margin-left: 40px;">ADDRESS: 1209 ORANGE ST</p> <p style="margin-left: 40px;">CITY/ST/ZIP: WILMINGTON, DE 19801</p>							
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>							
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: F. BORDEN WALKER TITLE: PRESIDENT ADDRESS: ONE HESS PLAZA CITY/ST/ZIP/CO: WOODBRIDGE, NJ 07095 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: F. BORDEN WALKER TITLE: PRESIDENT ADDRESS: ONE HESS PLAZA CITY/ST/ZIP/CO: WOODBRIDGE, NJ 07095	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	THOMAS THACKSTON ASST SECRETARY ONE HESS PLAZA WOODBIDGE, NJ 07095	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GAIL B. THOSTESEN ASST SECRETARY ONE HESS PLAZA WOODBIDGE, NJ 07095	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT M. BIGLIN TREASURER 1185 AVENUE OF THE AMERICAS NEW YORK, NY 10036	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ERIC FISHMAN ASST TREASURER 1185 AVENUE OF THE AMERICAS NEW YORK, NY 10036	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHRISTOPHER BALDWIN DIRECTOR ONE HESS PLAZA WOODBIDGE, NJ 07095	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LAWRENCE H. ORNSTEIN DIRECTOR 1185 AVENUE OF THE AMERICAS NEW YORK, NY 10036	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ GAIL B. THOSTESEN SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	GAIL B. THOSTESEN, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	1/8/2013 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			